Case 16-21459 Doc 1 Filed 07/01/16 Entered 07/01/16 07:42:30 Desc Main Document Page 1 of 72 United States Bankruptcy Court

Northern District of Illinois, Eastern Division

Phillips, Tyeisha D. Chapter 7

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors _____35

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: July 1, 2016

/s/ Tyeisha D. Phillips
Debtor

Joint Debtor

Bankamerica 450 American St Simi Valley, CA 93065-6285

Cap One NA PO Box 26625 Richmond, VA 23261-6625

Cap1/carsn PO Box 30253 Salt Lake City, UT 84130-0253

Capital One Bank USA N 15000 Capital One Dr Richmond, VA 23238-1119

Chld/Cbna PO Box 6497 Sioux Falls, SD 57117-6497

Citibank PO Box 6497 Sioux Falls, SD 57117-6497

Comenity Bank/Carsons 3100 Easton Square Pl Columbus, OH 43219-6232 Comenity Bank/Dmstctns PO Box 182789 Columbus, OH 43218-2789

Comenity Bank/Express PO Box 182789 Columbus, OH 43218-2789

Comenity Bank/Fashbug PO Box 182272 Columbus, OH 43218-2272

Comenity Bank/Nwyrk&Co 220 W Schrock Rd Westerville, OH 43081-2873

Comenity Bank/Vctrssec PO Box 182789 Columbus, OH 43218-2789

Comenitybank/venus 3100 Easton Square Pl Columbus, OH 43219-6232

David Hernandez, PC 17566 Windsor Pkwy Tinley Park, IL 60487-7327 Dsnb Macys 9111 Duke Blvd Mason, OH 45040-8999

Huntington National Ba 7 Easton Oval Columbus, OH 43219-6010

Kay Jewelers 375 Ghent Rd Akron, OH 44333-4601

Kay Jewelers
375 Ghent Rd
Fairlawn, OH 44333-4601

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

M3 Financial Services 10330 W Roosevelt Rd # S-2 Westchester, IL 60154-2571

Nationstar Mortgage Ll 350 Highland Dr Lewisville, TX 75067-4177 Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502-4962

Portfolio Recovery Associates PO Box 12914 Norfolk, VA 23541-0914

Rogers & Hol 20821 S Cicero Ave Matteson, IL 60443-1201

Syncb/gap PO Box 965005 Orlando, FL 32896-5005

Syncb/oldnavydc PO Box 965005 Orlando, FL 32896-5005

Syncb/tjx Cos PO Box 965015 Orlando, FL 32896-5015

Syncb/Walmart 4125 Windward Plz Alpharetta, GA 30005-8738 Syncb/Walmart DC PO Box 965024 Orlando, FL 32896-5024

Td Auto Finance 27777 Franklin Rd Farmington Hills, MI 48334

Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673

Tnb - Target
Minneapolis, MN 55440-0673

Wf Crd Svc Des Moines, IA 50306

Wfds/wds PO Box 1697 Winterville, NC 28590-1697

Wffinancial 2501 Seaport Dr Ste Bh30 Chester, PA 19013-2249 B201B (Form 201B) (P2/B)6-21459

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Signature of Joint Debtor (if any)

Desc Main

Date

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Northern District of Illinois, Eastern Division

IN RE:		Case No.
Phillips, Tyeisha D.		Chapter 7
Debtor(s		Chapter 1
	ON OF NOTICE TO CONSUMER D § 342(b) OF THE BANKRUPTCY CO	* /
Certificate of	[Non-Attorney] Bankruptcy Petition 1	Preparer
I, the [non-attorney] bankruptcy petition preparer notice, as required by § 342(b) of the Bankruptcy		that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Pet Address:	- F - C - C	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
x	(Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of offi partner whose Social Security number is provided		
	Certificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have rece	ived and read the attached notice, as require	ed by § 342(b) of the Bankruptcy Code.
Phillips, Tyeisha D.	X /s/ Tyeisha D. Philli	ps 7/01/2016
Printed Name(s) of Debtor(s)	Signature of Debtor	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Case No. (if known) ___

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Fill in this inform	nation to identify your c	350.		
Debtor 1	Tyeisha D. Phillip	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS, EASTERN DIVISION	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
Statemer	nt of Intentio	n for Indiv	iduals Filing Under Chapt	er 7
	vidual filing under chap		out this form if:	
_	e claims secured by you			
	ed personal property ar			for the meeting of ereditors
			ou file your bankruptcy petition or by the date set time for cause. You must also send copies to the c	
the form	m			
	ople are filing together to the form.	n a joint case, both	n are equally responsible for supplying correct info	rmation. Both debtors must sign
Ro as complete a	and accurate as nessible	. If more space is a	needed, attach a separate sheet to this form. On the	ton of any additional nages
	our name and case num		iceded, attach a separate sheet to this form. On the	top of any additional pages,
Davida Liet Ve	Oue diteue \A/h e	Coorned Claims		
Part 1: List Yo	our Creditors Who Have	Secured Claims		
•	•	t 1 of Schedule D:	Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the
information be Identify the cre	editor and the property th	at is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's H	luntington National E	За	☐ Surrender the property.	■ No
name:	J		☐ Retain the property and redeem it.	_ 140
Description of	2010 Infiniti FX35		Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
property	2010 1111111111111 1 X33		Agreement. ■ Retain the property and [explain]:	
securing debt:			Retain and pay pursuant to contract	
-				_
	our Unexpired Personal		Och data O Francisco O otrasta and Illianois d	Lange (Official Form 4000) (III in
			n Schedule G: Executory Contracts and Unexpired ired leases are leases that are still in effect; the lease	
			ustee does not assume it. 11 U.S.C. § 365(p)(2).	,
Describe vour u	nexpired personal prop	erty leases		Will the lease be assumed?
2000.1100 your u	monphisa personiai prop	only louded		
Lessor's name:	and			□ No
Description of lea Property:	sed			☐ Yes
-1 - 2-				– 163
Lessor's name:				□ No
Description of lea	sed			
Property:				☐ Yes
Lessor's name:				□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Phillips, Tyeisha D.	Case number (if known)
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property: Lessor's name:	☐ Yes
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intenti property that is subject to an unexpired lease.	on about any property of my estate that secures a debt and any personal
X /s/ Tyeisha D. Phillips Tyeisha D. Phillips	X Signature of Debtor 2
Signature of Debtor 1	
Date July 1, 2016	Date

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	Δ	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Tyeisha First name	F	First name
	example, your driver's license or passport).	D. Middle name		Middle name
	Bring your picture identification to your meetin with the trustee.	9 Phillips Last name and Suffix (Sr., Jr., II, III)	<u>_</u>	ast name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7151		

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Debtor 1 Phillips, Tyeisha D.

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	7040 O.W I	If Debtor 2 lives at a different address:		
		7216 S Washtenaw Ave Chicago, IL 60629-2018 Number, Street, City, State & ZIP Code Cook	Number, Street, City, State & ZIP Code		
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Phillips, Tyeisha D.

ar	t 2: Tell the Court About	our Ba	nkruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check 2010))	one. (For a b	rief description of each, see None top of page 1 and check the	otice Required by appropriate box.	v 11 U.S.C. § 342(b) for Individual	s Filing for Bankruptcy (Form		
	choosing to file under	Chapter 7							
		☐ Ch	apter 11						
		☐ Ch	apter 12						
		☐ Ch	apter 13						
3.	How you will pay the fee	_	about how you	the entire fee when I file my petition. Please check with the clerk's office in your local court for more details you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money orde riney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a					
☐ I need to pay the fee in installments. If you choose thi Filing Fee in Installments (Official Form 103A).					tion, sign and attach the Application	on for Individuals to Pay The			
			I request that not required to your family size	t my fee be waived (You may b, waive your fee, and may do see and you are unable to pay the	on only if you are filing for Chapter ome is less than 150% of the offic ints). If you choose this option, you a) and file it with your petition.	ial poverty line that applies to			
).	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes							
	o years :	- res			\\/han	Casa numbar			
			District		_ When	Case number			
			District	IL Northern District -	_ When	Case number			
			District	Chicago	When	Case number	15-24119		
10.	Are any bankruptcy cases pending or being filed by	■ No							
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	3.						
			Debtor			Relationship to y	/ou		
			District		When	Case number, if	known		
			Debtor			Relationship to y	/ou		
			District		_ When	Case number, if	known		
11.	Do you rent your residence?	■ No.	Go to I	ine 12.					
		☐ Yes	. Has yo	ur landlord obtained an evictior	n judgment again:	st you and do you want to stay in y	our residence?		
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statement</i> abankruptcy petition.	About an Evictior	n Judgment Against You (Form 10	01A) and file it with this		

)eb	case 16-2 otor 1 Phillips, Tyeisha I		Doc 1	Document Page 13 of 72 Case number (if known)
art	t 3: Report About Any Bus	sinesses Yo	ou Own as a	a Sole Proprietor
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part	t 4.
		☐ Yes.	Name and	d location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of b	pusiness, if any
If you have more than one sole proprietorship, use a separate sheet and attach it				
	to this petition.			e appropriate box to describe your business:
			_	ealth Care Business (as defined in 11 U.S.C. § 101(27A)) ngle Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			_	tockbroker (as defined in 11 U.S.C. § 101(53A))
			_	ommodity Broker (as defined in 11 U.S.C. § 101(6))
			_	one of the above
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines.	If you indicat cash-flow st	Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate te that you are a small business debtor, you must attach your most recent balance sheet, statement of tatement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11
	For a definition of small	■ No.	I am not fi	iling under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing Code.	under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of Yes. imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.	

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

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Debtor 1 Phillips, Tyeisha D.

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

П Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-21459 Doc 1 Filed 07/01/16 Entered 07/01/16 07:42:30 Desc Main Page 15 of 72 Case number (if known) Document Debtor 1 Phillips, Tyeisha D. Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. ■ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Yes. any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses ■ No are paid that funds will be available for distribution ☐ Yes to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 **1**-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities to □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy

case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Tyeisha D. Phillips Signature of Debtor 2 Tyeisha D. Phillips Signature of Debtor 1 Executed on Executed on July 1, 2016 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Phillips, Tyeisha D.

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David Hernandez	Date	July 1, 2016	
Signature of Attorney for Debtor		MM / DD / YYYY	
David Hernandez			
Printed name			
David Hernandez, P.C.			
Firm name			
17566 Windsor Pkwy			
Tinley Park, IL 60487-7327			
Number, Street, City, State & ZIP Code			
Contact phone (630) 862-6057	Email address	david@robablaw.com	
Contact phone (630) 862-6057	Email address	david@rehablaw.com	
99999			
Bar number & State			

Case 16-21459 Doc 1 Filed 07/01/16 Entered 07/01/16 07:42:30 Desc Main Document Page 17 of 72 Fill in this information to identify your case and this filing: Debtor 1 Tyeisha D. Phillips Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Do not deduct secured claims or exemptions. Put 7216 S Washtenaw Ave the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Street address, if available, or other description Condominium or cooperative П Manufactured or mobile home Current value of the Current value of the Chicago IL 60629-2018 Land entire property? portion you own? State ZIP Code Investment property \$104,500.00 \$104,500.00 Timeshare Describe the nature of your ownership interest □ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee Simple Debtor 1 only Cook Debtor 2 only

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$104,500.00

Check if this is community property

(see instructions)

Part 2: Describe Your Vehicles

County

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 and Debtor 2 only

property identification number: Residential Homestead

At least one of the debtors and another

Other information you wish to add about this item, such as local

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Debt	or 1 <u></u>	Phillips, Tyeisha D).	Document	Page 18 of 72 	se number (if known)	
3. C a	rs, vans	, trucks, tractors, spe	ort utility vehi	icles, motorcycles			
	No						
	Yes						
3.1	Make:	Infiniti		Who has an interest in the	e property? Check one		red claims or exemptions. Put secured claims on <i>Schedule D:</i>
	Model:	FX35		Debtor 1 only			e Claims Secured by Property.
	Year:	2010 mate mileage:	80000	Debtor 2 only		Current value of the entire property?	ne Current value of the portion you own?
		nformation:	00000	☐ Debtor 1 and Debtor 2 of ☐ At least one of the debtor	•	entile property:	portion you own:
		nobile // (Edmunds uterized Valuation		Check if this is comme (see instructions)		\$14,787	00 \$0.00
5 A	ou have a		Vrite that num	for all of your entries fron the state of th			\$0.00
		or have any legal or o		rest in any of the followi	ng items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	xamples:	Major appliances, furn		hina, kitchenware			
	l No						
	Yes. De	escribe Hous	sehold Good	ds and Furnishings			\$750.00
		[
E	l _{No}			stereo, and digital equipmodial players, games	ent; computers, printers, s	canners; music collect	ions; electronic devices
E	xamples: I _{No}	s of value Antiques and figurines collections, memorab			s, pictures, or other art ob	iects; stamp, coin, or b	aseball card collections; other
E		for sports and hobb Sports, photographic, instruments		other hobby equipment; bio	cycles, pool tables, golf clu	bs, skis; canoes and k	ayaks; carpentry tools; musical
	Yes. De	escribe					
	l No	s: Pistols, rifles, shotgu	uns, ammunitio	on, and related equipment			
	Clothes Examples I No	s: Everyday clothes, fu	rs, leather coat	s, designer wear, shoes, a	ccessories		

		Case 16-2	21459 D00		0.001/16		//01/16 07:42:30	Desc Main
De	ebtor 1	Phillips, Tye	eisha D.	Do	cument	Page 19 of	72 Case number (if known)	
	Yes.	Describe						
			Wearing App	arel				\$0.00
12.	Jewelr	•				and an about the	latab.aaaa.aaa.ld	-1
	□ No	<i>bies:</i> Everyday jew	weiry, costume jewe	ıry, engageme	int rings, wedding	g rings, neirioom jev	velry, watches, gems, gold,	Silver
	_	Describe						
			Misc Costum	e Jewelry				\$150.00
13.	Non-fa	rm animals						
	`	ples: Dogs, cats, t	birds, horses					
	■ No							
	⊔ Yes.	Describe						
14.	Any ot	her personal and	d household items	s you did not	already list, ind	cluding any health	aids you did not list	
	■ No							
	☐ Yes.	Give specific info	ormation					
15							s you have attached for	\$900.00
	Part :	3. Write that num	nber here	•••••				Ψ300.00
		escribe Your Finan						
DC	you ov	wn or nave any i	egal or equitable i	interest in any	y of the following	ng?		Current value of the portion you own?
								Do not deduct secured
								claims or exemptions.
16.	Cash							
		<i>ples:</i> Money you h	nave in your wallet, i	n your home, i	n a safe deposit	box, and on hand w	hen you file your petition	
	■ No							
	⊔ Yes.							
17.		its of money					Pr. 1	
	Exam	•	avings, or other fina If you have multipl		•	•	redit unions, brokerage hou	ses, and other similar
	□ No		,			,		
	Yes				Institution n	name:		
			17.1. Check	king Accour	nt Fifth Thir	d Bank		\$1,722.00
18.	Bonds	, mutual funds, o	or publicly traded	stocks				
	_ ′	ples: Bond funds,	investment accoun	its with brokera	age firms, money	market accounts		
	■ No		la akika ki a	:				
	☐ Yes		Institutio	n or issuer nar	me:			
19.	Non-pu	ublicly traded sto	ock and interests	in incorporat	ed and unincor	porated business	es, including an interest i	n an LLC, partnership, and
		enture/						
	■ No	O: '' : '						
	⊔ Yes.	Give specific info	formation about the Name of ent				% of ownership:	
				•			•	
20.						gotiable instrument ssory notes, and mo		
						signing or delivering		
	■ No							
	ΠVoc	Give specific info	ormation about them	n				

Official Form 106A/B Schedule A/B: Property page 3

Issuer name:

D	ebtor 1	Phillips.	Tyeisha D.	Document	Page 20 of 72 Case number	er (if known)	
			ion accounts				
				01(k), 403(b), thrift saving	s accounts, or other pension or prof	fit-sharing plans	
	Yes. I	List each acco	ount separately.				
			Type of account:	Institution US Post	name: al Service Pension and Fund:	<u>s</u>	unknown
			-				
22.	Your sh Examp	nare of all unu			ue service or use from a company ric, gas, water), telecommunications	companies, or others	
	■ No □ Yes			Institution	name or individual:		
23.	Annuiti	es (A contrac	et for a periodic payment of	f money to you, either for li	fe or for a number of years)		
	☐ Yes		Issuer name and descri	ption.			
24.			ation IRA, in an account 1), 529A(b), and 529(b)(1)		gram, or under a qualified state tu	ıition program.	
	Yes		Institution name and des	scription. Separately file the	e records of any interests.11 U.S.C.	§ 521(c):	
25.	Trusts,	equitable or	future interests in prop	erty (other than anythin	g listed in line 1), and rights or po	owers exercisable fo	or your benefit
	☐ Yes.	Give specific	information about them				
26.				rets, and other intellecture proceeds from royalties and			
	■ No □ Yes.	Give specific	c information about them				
27.			s, and other general into		holdings, liquor licenses, professiona	al licenses	
	■ No □ Yes.	Give specific	c information about them	. .			
М	oney or I	property owe	ed to you?			Cu	rrent value of the
			·			Do	rtion you own? not deduct secured ims or exemptions.
28.	. Tax ref	unds owed to	o you				
	■ No	Civo aposifia i	information about them, in	aluding whather you alreed	dy filed the returns and the tax years.		
	□ res. (Sive specific	iniornation about them, in	icluding whether you alread	ly filed the returns and the tax years.		
29.	Family		or lump sum alimony, sp	ousal support, child supp	ort, maintenance, divorce settlemen	nt, property settlemer	ıt .
	■ No		771	oucus cuppost, cima cupp	51, 11, 11, 11, 11, 11, 11, 11, 11, 11,	n, property comerner	•
	☐ Yes. (Give specific	information				
30.	Examp	<i>les:</i> Unpaid w	neone owes you vages, disability insurance oans you made to someo		its, sick pay, vacation pay, workers'	compensation, Socia	al Security benefits;
	■ No □ Yes.	Give specific	information				
31.	_Examp	t s in insuran bles: Health, d		health savings account (H	SA); credit, homeowner's, or renter's	s insurance	
	■ No □ Yes. I	Name the insu	urance company of each p	policy and list its value.			
			Company name		Beneficiary:		urrender or refund lue:

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Debtor 1	Phillips, Tyeisha D.	Document	Page 21 of 72	Case number (if known)	
If you a died.	terest in property that is due you from are the beneficiary of a living trust, expect Give specific information			ently entitled to receive p	property because someone has
Examµ ■ No	against third parties, whether or not yoles: Accidents, employment disputes, ins			r payment	
■ No □ Yes. 35. Any fir	Describe each claim nancial assets you did not already list Give specific information	every nature, including	counterclaims of the	debtor and rights to s	et off claims
Part 4	the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of all of your entries from the dollar value of the do				\$1,722.00
37. Do you 6	own or have any legal or equitable interest to to Part 6. Go to line 38.		-		
	escribe Any Farm- and Commercial Fishing- you own or have an interest in farmland, list it in		n or Have an Interest In.		
■ No.	I own or have any legal or equitable in Go to Part 7. Go to line 47.	terest in any farm- or co	ommercial fishing-rela	ated property?	
Part 7:	Describe All Property You Own or Have a	an Interest in That You Dic	Not List Above		
Exam _i ■ No	n have other property of any kind you obles: Season tickets, country club members				
54. Add 1	the dollar value of all of your entries fr	om Part 7. Write that nu	mber here		\$0.00

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Official Form 106A/B Schedule A/B: Property page 5

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Document Debtor 1 Phillips, Tyeisha D.

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$104,500.00
56.	Part 2: Total vehicles, line 5		\$0.00		
57.	Part 3: Total personal and household items, line 15		\$900.00		
58.	Part 4: Total financial assets, line 36		\$1,722.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$2,622.00	Copy personal property total	\$2,622.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$107,122.00

Official Form 106A/B Schedule A/B: Property page 6 Case 16-21459 Doc 1 Filed 07/01/16 Entered 07/01/16 07:42:30 Desc Main

Fill in this inforr	mation to identify your	case:		
Debtor 1	Tyeisha D. Philli			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	NC
_				
Case number _				
(II KIIOWII)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	/ the Pro	perty Yo	ou Claim	as Exempt
---------	----------	-----------	----------	----------	-----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	7216 S Washtenaw Ave	\$104,500.00		\$15,000.00	735 ILCS 5/12-901	
(Chicago IL, 60629-2018 County: Cook Line from Schedule A/B: 1.1	С		100% of fair market value, up to any applicable statutory limit		
	7216 S Washtenaw Ave	\$104,500.00		\$15,000.00	735 ILCS 5/12-906	
Chi Co	Chicago IL, 60629-2018 County: Cook Line from Schedule A/B 1.1			100% of fair market value, up to any applicable statutory limit		
	Household Goods and Furnishings Line from Schedule A/B 6.1	\$750.00		\$750.00	735 ILCS 5/12-1001(b)	
	Line Irom Scriedule A/B 0.1			100% of fair market value, up to any applicable statutory limit		
	Wearing Apparel Line from Schedule A/B 11.1	\$0.00		\$300.00	735 ILCS 5/12-1001(a)	
	Line non ocheque ALL TITT			100% of fair market value, up to any applicable statutory limit		
	Misc Costume Jewelry Line from Schedule A/B 12.1	\$150.00		\$150.00	735 ILCS 5/12-1001(b)	
	LINE HOIT SCHEUUIE AVD. 12.1			100% of fair market value, up to any applicable statutory limit		

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim the portion you only one box for each exemption.		Specific laws that allow exemption	
	Fifth Third Bank Line from Schedule A/B 17.1			\$1,722.00	735 ILCS 5/12-1001(b)
	Line non Schedule A/B 11.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			on or after the date of adjustment.)	
Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?					

Yes

Case 16-21459 Doc 1 Filed 07/01/16 Entered 07/01/16 07:42:30 Desc Main Page 25 of 72 Document Fill in this information to identify your case: Debtor 1 Tyeisha D. Phillips Middle Name Last Name First Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Value of collateral Amount of claim Unsecured much as possible, list the claims in alphabetical order according to the creditor 's name. Do not deduct the that supports this portion value of collateral. claim If any Bankamerica Describe the property that secures the claim: \$0.00 \$0.00 \$0.00 Creditor's Name 450 American St As of the date you file, the claim is: Check all that Simi Valley, CA 93065-6285 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) ■ Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred 2009-05-12 Last 4 digits of account number 6540 Describe the property that secures the claim: \$24,014.00 \$14,787.00 **Huntington National Ba** \$9,227.00 2010 Infiniti FX35 Automobile // (Edmunds **Computerized Valuation)** 7 Easton Oval As of the date you file, the claim is: Check all that Columbus, OH apply. 43219-6010 ☐ Contingent Number, Street, City, State & Zip Code Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply.

■ Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred 2014-11

An agreement you made (such as mortgage or secured

Statutory lien (such as tax lien, mechanic's lien)

Judgment lien from a lawsuit ☐ Other (including a right to offset)

Last 4 digits of account number 3852

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Debtor 1 Tyeisha D. Phillips		Case number (f know)		
First Name Middle N	lame Last Name			
2.3 Huntington National Ba	Describe the property that secures the claim:	\$24,014.00	\$0.00	\$24,014.00
Creditor's Name		ΨΣ-1,01-1.00	Ψ0.00	Ψ24,014.00
7 Easton Oval	As of the date you file, the claim is: Check all that			
Columbus, OH	apply.			
43219-6010	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secucar loan)	ired		
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 2014-11	Last 4 digits of account number 3852			
2.4 Nationstar Mortgage LI	Describe the property that secures the claim:	<u>\$142,381.00</u>	\$104,500.00	\$37,881.00
Creditor's Name	7216 S Washtenaw Ave, Chicago, IL			
	60629-2018			
350 Highland Dr	Residential Homestead As of the date you file, the claim is: Check all that			
Lewisville, TX	apply.			
75067-4177	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the debt2 Objections	☐ Disputed Nature of lien. Check all that apply.			
Who owes the debt? Check one.				
Debtor 1 only	An agreement you made (such as mortgage or secucar loan)	ired		
Debtor 2 only	<u> </u>			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
•	Local Addition of account annual to 5000			
Date debt was incurred 2009-05	Last 4 digits of account number 5228			
2.5 Td Auto Finance	Describe the property that secures the claim:	\$0.00	\$0.00	\$0.00
Creditor's Name		-	<u>,</u>	
27777 Franklin Rd	As of the date you file, the claim is: Check all that			
Farmington Hills, MI	apply.			
48334	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secu	ired		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 2001-06	Last 4 digits of account number 4059			
O O Mitala II.	Describe the second of the second of	A 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	40.00	**
2.6 Wfds/wds Creditor's Name	Describe the property that secures the claim:	\$0.00	\$0.00	\$0.00
Cieulioi s Mallie				
PO Box 1697				
Winterville, NC	10 (01 11 5 0 111 111 111 111 111 111 111 11			• •
Official 28390-1697 Additiona	al Page of Schedule D: Creditors Who Have Claim	s Secured by Property		page 2 of 3

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Debtor 1 Tyeisha D. Phillips	Case number (if know)							
First Name Middle N	lame Last Name							
	As of the date you file, the claim is: Check all that apply. Contingent							
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed							
Who owes the debt? Check one.	Nature of lien. Check all that apply.							
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or secured car loan)							
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)							
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit							
Check if this claim relates to a community debt	Other (including a right to offset)							
Date debt was incurred 2009-07	Last 4 digits of account number 6154							
2.7 Wffinancial	Describe the property that secures the claim: \$0.00 \$0.00 \$0.00							
Creditor's Name								
2501 Seaport Dr Ste	As of the date you file, the claim is: Check all that							
Bh30 Chaster BA 10013 3340	apply.							
Chester, PA 19013-2249 Number, Street, City, State & Zip Code	□ Contingent							
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed							
Who owes the debt? Check one.	Nature of lien. Check all that apply.							
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or secured							
■ Debtor 2 only	car loan)							
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)							
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit							
☐ Check if this claim relates to a community debt	Other (including a right to offset)							
Date debt was incurred 2006-09	Last 4 digits of account number 9001							
Add the dollar value of your entries in Co	lumn A on this page. Write that number here: \$190,409.00							
If this is the last page of your form, add the Write that number here:	ne dollar value totals from all pages. \$190,409.00							

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 2	<u>8 იf 72</u>	
Fill in this info	rmation to identify your o	ase:			
Debtor 1	Tyeisha D. Phillip	ns.			
	First Name	Middle Name	Last Name		
Debtor 2	-				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS, EAS	TERN DIVISION	
Casa numbar					
Case number (if known)					☐ Check if this is an
					amended filing
~~					
	m 106E/F				_
3chedule	E/F: Creditors W	ho Have Unsecured	Claims		12/15
creditors Who he Continuation ase number (if k	Have Claims Secured by Pr Page to this page. If you have	operty. If more space is needed, c ve no information to report in a Pa	opy the Part yo	ou need, fill it out, number	ly secured claims that are listed in Schedul r the entries in the boxes on the left. Attach r additional pages, write your name and
1. Do any cred	itors have priority unsecure	d claims against you?			
■ No. Go to	Part 2.				
☐ Yes.					
	All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any cred	itors have nonpriority unsec	ured claims against you?			
□ No. You h	nave nothing to report in this p	art. Submit this form to the court with	your other sche	edules	
	iavo rioaming to roport in thio p	art. Cubinit uno form to the court with	your outlor corte	duiso.	
Yes.					
unsecured cl	aim, list the creditor separately		d, identify what t	ype of claim it is. Do not list	editor has more than one nonpriority t claims already included in Part 1. If more d claims fill out the Continuation Page of Part
					Total claim
4.1 Cap C	ne NA	Last 4 digits of acc	count number	4479	\$0.00
	rity Creditor's Name				
DO D	W 2662E	When was the deb	t incurred?	2012-03	
	ox 26625 nond, VA 23261-6625				
	Street City State Zlp Code	As of the date you	file, the claim	is: Check all that apply	
Who inc	curred the debt? Check one.				
☐ Debt	or 1 only	☐ Contingent			
■ Debt	or 2 only	☐ Unliquidated			
☐ Debt	or 1 and Debtor 2 only	☐ Disputed			
	ast one of the debtors and and	•	RITY unsecure	d claim:	
☐ Chee	ck if this claim is for a comr	nunity			
debt	aim subject to offset?	<u> </u>		aration agreement or divorce	e that you did not
■ No		☐ Debts to pension	n or profit-sharir	ng plans, and other similar o	debts
☐ Yes		Other. Specify			
56		- Other. Specify			

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Case number (f know)

Debtor 1 Phillips, Tyeisha D. 4.2 \$0.00 Cap1/carsn Last 4 digits of account number 9681 Nonpriority Creditor's Name When was the debt incurred? 1997-05-03 PO Box 30253 Salt Lake City, UT 84130-0253 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Capital One Bank USA N Last 4 digits of account number 8541 \$0.00 Nonpriority Creditor's Name When was the debt incurred? 2012-09 15000 Capital One Dr Richmond, VA 23238-1119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 Chld/Cbna Last 4 digits of account number \$0.00 9497 Nonpriority Creditor's Name 2006-09-23 When was the debt incurred? PO Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed \square At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Case number (fr know)

Debte	or 1 Phillips, Tyeisha D.	——————————————————————————————————————	Case number (f know)	
4.5	Citibank	Last 4 digits of account number	5967	\$6,499.00
	Nonpriority Creditor's Name	When was the debt incurred?	2013-09	
	PO Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.6	Citibank N.A.	Last 4 digits of account number	5967	\$6,499.00
	Nonpriority Creditor's Name	When was the debt incurred?	2013-09	
	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify		
4.7	Comenity Bank/Carsons	Last 4 digits of account number	7391	\$0.00
	Nonpriority Creditor's Name	When we the debt incomed?		
	3100 Easton Square PI Columbus, OH 43219-6232	When was the debt incurred?	2012-07	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	■ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	1.1.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		

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¹ Phillips, Tyeisha D.		Case number (if know)	
Comenity Bank/Dmstctns Nonpriority Creditor's Name	Last 4 digits of account number	5329	\$0.00
Nonpholity Greator's Name	When was the debt incurred?	2008-09	
PO Box 182789			
Columbus, OH 43218-2789 Number Street City State Zlp Code	A of the determination the electric	San Ohanda all that are the	
Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан tnat apply	
Debtor 1 only			
_	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	L. L. C.	
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	Student loans		
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	_		
res	Other. Specify		
Comenity Bank/Express	Last 4 digits of account number	0412	\$2,362.00
Nonpriority Creditor's Name			,
DO D 400700	When was the debt incurred?	2008-10	
PO Box 182789 Columbus, OH 43218-2789			
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Comonity Ponk/Fachburg	Last 4 digits of account number	1003	\$0.00
Comenity Bank/Fashbug Nonpriority Creditor's Name			φυ.υυ
	When was the debt incurred?	2010-05	
PO Box 182272			
Columbus, OH 43218-2272 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	c gara you mo, and olumn		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Student loans		
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	agreement of diverse that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify		
	- Outlot. Opooliy		

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r 1 Phillips, Tyeisha D.		Case number (if know)	
Comenity Bank/Nwyrk&Co	Last 4 digits of account number	8825	\$0.00
Nonpriority Creditor's Name	When was the debt incurred?	2008-12	
220 W Schrock Rd Westerville, OH 43081-2873	_		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent		
Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans	 	
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes			
Comenity Bank/Nwyrk&Co	Last 4 digits of account number	7569	\$0.00
Nonpriority Creditor's Name	When was the debt incurred?	2015-07	
220 W Schrock Rd Westerville, OH 43081-2873	when was the dept incurred:	2015-07	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	ng plans, and other similar debts	
Yes	_	ig pians, and other similar debts	
	. ,		
Comenity Bank/Vctrssec Nonpriority Creditor's Name	Last 4 digits of account number	8065	\$2,826.00
DO D. 400-00	When was the debt incurred?	2005-08	
PO Box 182789 Columbus, OH 43218-2789			
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and the second s	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		

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^{r 1} Phillips, Tyeisha D.		Case number (if know)		
Comenitybank/venus	Last 4 digits of account number	2031	\$874.00	
Nonpriority Creditor's Name	When was the debt incurred?	2015-07		
3100 Easton Square Pl Columbus, OH 43219-6232				
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
Debtor 1 only	Пол			
Debtor 2 only	☐ Contingent ☐ Unliquidated			
	_ '			
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
At least one of the debtors and another	Student loans	a ciaiii.		
☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa	☐ Obligations arising out of a separation agreement or divorce that you did not		
-	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte		
■ No	_			
Yes	Other. Specify			
David Hernandez, PC	Last 4 digits of account number		\$1,700.00	
Nonpriority Creditor's Name	- When we the debt in some do			
17566 Windsor Pkwy	When was the debt incurred?	July 2016		
Tinley Park, IL 60487-7327				
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
\square Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
Yes	Other. Specify			
DR. NASER RUSTOM Nonpriority Creditor's Name	Last 4 digits of account number	9442	\$0.00	
	When was the debt incurred?	2012-07		
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
■ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
Yes	Other. Specify			

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Phillips, Tyelsna D.		Case number (if know)	
Dsnb Macys	Last 4 digits of account number	7700	\$0.00
Nonpriority Creditor's Name	When was the debt incurred?	2005-06-01	
9111 Duke Blvd		2000 00 01	
Mason, OH 45040-8999			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only			
Debtor 2 only	Contingent		
	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
At least one of the debtors and another	Student loans	a Claim.	
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
Kay Jewelers	Last 4 digits of account number	9339	\$0.00
Nonpriority Creditor's Name	_		*
375 Ghent Rd	When was the debt incurred?	2015-03-11	
Akron, OH 44333-4601			
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Vov. lovelere	Last 4 digits of account number	6745	\$0.00
Kay Jewelers Nonpriority Creditor's Name		6745	φυ.υυ
	When was the debt incurred?	2005-08	
375 Ghent Rd			
Fairlawn, OH 44333-4601 Number Street City State Zlp Code	_ As of the date you file, the claim	s. Check all that apply	
Who incurred the debt? Check one.	7.5 of the date you me, the claim	o. Shook all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and the state of t	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		

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Case number (f know)

Debtor 1 Phillips, Tyeisha D. 4.20 \$0.00 Kohls/capone Last 4 digits of account number 0309 Nonpriority Creditor's Name When was the debt incurred? 2011-04 N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.21 **Portfolio Recovery Associates** Last 4 digits of account number 2015 \$6,573.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 12914 Norfolk, VA 23541-0914 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.22 Rogers & Hol Last 4 digits of account number \$0.00 8904 Nonpriority Creditor's Name When was the debt incurred? 2009-02-06 20821 S Cicero Ave Matteson, IL 60443-1201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed \square At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Phillips, Tyeisha D. 4.23 \$0.00 Syncb/gap Last 4 digits of account number 2583 Nonpriority Creditor's Name When was the debt incurred? 2005-10 PO Box 965005 Orlando, FL 32896-5005 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.24 Syncb/oldnavydc Last 4 digits of account number \$0.00 4287 Nonpriority Creditor's Name When was the debt incurred? 2010-06-24 PO Box 965005 Orlando, FL 32896-5005 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.25 Syncb/tjx Cos Last 4 digits of account number 0075 \$0.00 Nonpriority Creditor's Name 2008-05-22 When was the debt incurred? PO Box 965015 Orlando, FL 32896-5015 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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tor 1 Phillips, Tyeisha D.		Case number (f know)					
Syncb/Walmart	Last 4 digits of account number	8413	\$0.00				
Nonpriority Creditor's Name	When was the debt incurred?	2009-12-16					
4125 Windward Plz Alpharetta, GA 30005-8738 Number Street City State Zlp Code	As of the date you file, the claim						
Who incurred the debt? Check one.	_						
Debtor 1 only	Contingent						
Debtor 2 only	Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	aration agreement or divorce that you did not					
Is the claim subject to offset?	report as priority claims						
No	Debts to pension or profit-sharing	g plans, and other similar debts					
Yes	Other. Specify						
Syncb/Walmart DC Nonpriority Creditor's Name	Last 4 digits of account number	2581	\$0.00				
Nonpholity Orealtor 3 Name	When was the debt incurred?	2011-05-17					
PO Box 965024 Orlando, FL 32896-5024							
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
Who incurred the debt? Check one.							
☐ Debtor 1 only	☐ Contingent						
Debtor 2 only	Debtor 2 only						
Debtor 1 and Debtor 2 only	☐ Disputed						
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
\square Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
☐ Yes	Other. Specify						
Td Bank USA/Targetcred	Last 4 digits of account number	1548	\$3,035.00				
Nonpriority Creditor's Name	When we she debtion we do						
PO Box 673 Minneapolis, MN 55440-0673	When was the debt incurred?	2010-12					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not					
Is the claim subject to offset?	report as priority claims	·					
No	Debts to pension or profit-sharing	g plans, and other similar debts					
□ ves	Other Specify						

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Debto	r 1 Phillips, Tyeisha D.		Case number (if know)				
4.29	Tnb - Target	Last 4 digits of account number	4724	\$0.00			
	Nonpriority Creditor's Name	When was the debt incurred?	2005-10				
	Minneapolis, MN 55440-0673	_					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	At least one of the debtors and another	Student loans	d Claim.				
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
4.30	Unknown Plaintiff	Last 4 digits of account number	2015	\$6,573.00			
	Nonpriority Creditor's Name	- When we the debt in sure do					
		When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	Type of NONPRIORITY unsecured claim:				
	\square Check if this claim is for a community	☐ Student loans					
	debt	Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte				
		_	g plans, and other similar debts				
	Yes	Other. Specify					
4.31	Wf Crd Svc	Last 4 digits of account number	6754	\$0.00			
	Nonpriority Creditor's Name	When was the debt incurred?	2008-09-02				
	Des Moines, IA 50306	_					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed	d alabas				
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:				
	☐ Check if this claim is for a community debt	_	uration agreement or diverse that you did not				
	Is the claim subject to offset?	E obligations another a doparation agreement of arvoice that you did not					
	■ No	Debts to pension or profit-sharing					
	□Yes	Other. Specify					
		— Other opening					
Part 3		•					
is try have	this page only if you have others to be notified a ring to collect from you for a debt you owe to so more than one creditor for any of the debts that ied for any debts in Parts 1 or 2, do not fill out o	meone else, list the original creditor in t you listed in Parts 1 or 2, list the addit	Parts 1 or 2, then list the collection agency he	ere. Similarly, if you			
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?				
-		Line <u>4.16</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	;			
1033	0 W Roosevelt Rd # S-2		Part 2: Creditors with Nonpriority Unsecured Cla	aime			

Westchester, IL 60154-2571

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Phillips, Tyelsna D.		Case number (if know)	
	Last 4 digits of account number	9442	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Portfolio Recovery Ass	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
120 Corporate Blvd Ste 1 Norfolk, VA 23502-4962		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	5967	
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
Portfolio Recovery Ass	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
120 Corporate Blvd Ste 1 Norfolk, VA 23502-4962		Part 2: Creditors with Nonpriority Unsecured Claims	
,	Last 4 digits of account number	5967	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

5967

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims	0	Obligations original and of a second in a second and discuss that			
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	36,941.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	36,941.00

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			III FAUE 40 UL //	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tyeisha D. Philli	os		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	
Case number				
(ii kilowii)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	-

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		Docume	ent Page 41 d	of 72
Fill in this in	nformation to identify your	case:		
Debtor 1	Tyeisha D. Phillip	ne		
DCDIOI 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTER	N DIVISION
Case number	⊃r			
(if known)				☐ Check if this is an
				amended filing
Official	Form 106U			
	Form 106H	1.4		
Schedu	ule H: Your Cod	ebtors		12/15
case numbe	r (if known). Answer every country and the country of the country	question.		 On the top of any Additional Pages, write your name and a codebtor.
_				
■ No □ Yes				
	n the last 8 years, have you ia, Idaho, Louisiana, Nevada,			1? (Community property states and territories include Arizona, d Wisconsin.)
_	Go to line 3. Did your spouse, former spou:	se, or legal equivalent live w	ith you at the time?	
	,p,p	,9	, ,	
line 2 a	gain as a codebtor only if th Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	f your spouse is filing with you. List the person shown in a you have listed the creditor on Schedule D (Official Forn se Schedule D, Schedule E/F, or Schedule G to fill out
	olumn 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	ame			Schedule E/F, line
				☐ Schedule G, line
N	umber Street			<u> </u>
	ity	State	ZIP Code	
3.2	ame			Schedule D, line
.,,				☐ Schedule E/F, line ☐ Schedule G, line
				— Octroduce O, little
	umber Street ity	State	ZIP Code	
C	··,	Ciaio	211 0000	

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E.11	to the telegraph of the following									
	in this information to identify you									
Dei	otor 1 Tyeisha	D. Phillips			-					
_	btor 2 buse, if filing)									
Uni	ited States Bankruptcy Court for	the: NORTHERN DISTRI	CT OF ILLINOIS, EAST	ERN						
Cas	se number				ł	Check if	this is:			
(If kr	nown)		_			☐ An ar	mended	filing		
_								t showing the follow	g postpetition of ving date:	chapter 13
<u>U</u>	fficial Form 106l					MM /	DD/ YY	/YY		
S	chedule I: Your Ir	ncome								12/1
spo atta	plying correct information. If y use. If you are separated and y ch a separate sheet to this for the control of	your spouse is not filing wit m. On the top of any addition	th you, do not include	inform	ation a	bout your	spous	e. If more	space is ne	eded,
1.	Fill in your employment information.		Debtor 1			De	btor 2	or non-fil	ing spouse	
	If you have more than one job,	Employment status	■ Employed	■ Employed			Employ	/ed		
	attach a separate page with information about additional employers.	Occupation	☐ Not employed				Not em	ployed		
	Include part-time, seasonal, o self-employed work.	•	US Postal Service	e						
	Occupation may include stude homemaker, if it applies.	ent or Employer's address	PO Box 9998 Oak Lawn, IL 60	454						
		How long employed t	here? 4 years				_			
Pai	rt 2: Give Details About	Monthly Income								
	mate monthly income as of the ss you are separated.	e date you file this form. If y	ou have nothing to repo	rt for an	y line, v	vrite \$0 in t	he spac	e. Include	e your non-filii	ng spouse
	u or your non-filing spouse have ce, attach a separate sheet to this		bine the information for	all empl	oyers fo	or that pers	on on th	ne lines be	elow. If you ne	eed more
					F	or Debtor	1		otor 2 or ng spouse	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	6,920	0.00	\$	N/A	
3.	Estimate and list monthly ov	vertime pay.		3.	+\$_		0.00	+\$	N/A	- 1
4.	Calculate gross Income. Ad	d line 2 + line 3.		4.	\$	6 920 0	00	\$	N/A	

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Debtor	1 -	Phillips, Tyeisha D.	_	Case	number (if known)			
				For	Debtor 1		Debtor 2 or filing spouse	
С	op	y line 4 here	4.	\$	6,920.00	\$	N/A	
5. L i	ist	all payroll deductions:						
5. –		Tax, Medicare, and Social Security deductions	5a.	\$	1,528.00	\$	N/A	
51		Mandatory contributions for retirement plans	5b.	\$ -	0.00	\$—	N/A	
50		Voluntary contributions for retirement plans	5c.	\$-	313.00	\$	N/A	
5		Required repayments of retirement fund loans	5d.	\$-	0.00	\$	N/A	
56	Э.	Insurance	5e.	\$	744.00	\$	N/A	
51	i.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
5	g.	Union dues	5g.	\$_	58.00	\$	N/A	
51	h.	Other deductions. Specify:	5h.+	- \$	0.00	+ \$	N/A	
6. A	dd	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	2,643.00	\$	N/A	
7. C	alc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,277.00	\$	N/A	
8. L i 8a		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
81	h	Interest and dividends	8b.	\$ -	0.00	\$	N/A	
80	С.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 8c.	\$	0.00	\$	N/A	
80	d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
86	Э.	Social Security	8e.	\$	0.00	\$	N/A	
8f 8g	g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.	\$_ \$_	0.00	\$	N/A N/A	
OI	h.	Other monthly income. Specify:	8h.+	- \$_	0.00	+ \$	N/A	
9. A	dd	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,277.00 + \$_		N/A = \$ 4,27	7.00
In ot D	clu her o n	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your defineds or relatives. ot include any amounts already included in lines 2-10 or amounts that are not avoify:	lependen		,			0.00
		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain					\$ 4,277 Combined	7.00
13. D ■	ľ	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				monthly inco	me

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Fill	in this information to identify your case:					
Deb	tor 1 Tyeisha D. Phillips			Che	ck if this is:	
Deb	otor 2				An amended filing A supplement show	ving postpetition chapter 13
(Spo	buse, if filing)		_	_	expenses as of the	
Unit	, ,	RN DISTRICT OF ILLING I DIVISION	DIS,		MM / DD / YYYY	
1	e number nown)					
O:	fficial Form 106J					
S	chedule J: Your Expens	es				12/1:
info	as complete and accurate as possible. If to primation. If more space is needed, attach acrown). Answer every question. t 1: Describe Your Household					
1.	Is this a joint case?					
	No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate	household?				
	☐ No ☐ Yes. Debtor 2 must file Official I	Form 106J-2, <i>Expenses f</i> o	or Separate Househo	oldof Debto	r 2.	
2.	Do you have dependents? ■ No					
		ill out this information for ach dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents names.					☐ No ☐ Yes ☐ No
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No				_	☐ Yes
exp	t 2: Estimate Your Ongoing Monthly E imate your expenses as of your bankruptoenses as of a date after the bankruptcy is licable date.	cy filing date unless yo				
val	lude expenses paid for with non-cash gov ue of such assistance and have included i ficial Form 106l.)				Your exp	enses
4.	The rental or home ownership expenses payments and any rent for the ground or lot.		clude first mortgage	4. \$	\$	1,200.00
	If not included in line 4:					
	4a. Real estate taxes			4a. S	2	0.00
	4b. Property, homeowner's, or renter's in	surance		4a. 3 4b. 3		0.00
	4c. Home maintenance, repair, and upk			4c. S	·	150.00
	4d. Homeowner's association or condom			4d. S	·	0.00
5.	Additional mortgage payments for your	residence, such as hom	e equity loans	5. 3	<u> </u>	0.00

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Debtor 1 Phillip	os, Tyeisha D.	Case numl	ber (if known)	
6. Utilities:				
	sity, heat, natural gas	6a.	\$	320.00
	sewer, garbage collection	6b.	\$	70.00
	one, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
•	Specify:	6d.	\$	0.00
	usekeeping supplies	— 7.	\$	500.00
	d children's education costs	8.	\$	
				400.00
•	Indry, and dry cleaning	9.	\$	65.00
	e products and services	10.	\$	250.00
	dental expenses	11.	\$	75.00
	on. Include gas, maintenance, bus or train fare. e car payments.	12.	\$	380.00
	nt, clubs, recreation, newspapers, magazines, and books	13.	\$	75.00
	ontributions and religious donations	14.	\$	0.00
5. Insurance.	Thiributions and rengious domations	1-7.	Ψ	0.00
	e insurance deducted from your pay or included in lines 4 or 20.			
15a. Life ins		15a.	\$	50.00
15b. Health		15b.	·	0.00
15c. Vehicle		15c.	\$	130.00
	nsurance. Specify:	15d.	·	0.00
	t include taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
Specify:		16.	\$	0.00
	or lease payments: yments for Vehicle 1	17a.	\$	493.00
	yments for Vehicle 2	17a. 17b.	·	
			· ———	0.00
17c. Other.		— 17c.	\$	0.00
17d. Other.	· · ·	17d.	\$	0.00
	nts of alimony, maintenance, and support that you did not report as myour pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	ents you make to support others who do not live with you.		\$	0.00
Specify:	you.	19.		0.00
	operty expenses not included in lines 4 or 5 of this form or on Sched		r Income.	
	ges on other property	20a.		0.00
20b. Real es		20b.	\$	0.00
	ty, homeowner's, or renter's insurance	20c.	·	0.00
•	nance, repair, and upkeep expenses	20d.		0.00
	wner's association or condominium dues	20a.	·	0.00
Other: Specif		21.	·	
. Other. Specii	у.		- Ψ	0.00
2. Calculate yo	ur monthly expenses			
22a. Add line	s 4 through 21.		\$	4,408.00
22b. Copy line	e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line	22a and 22b. The result is your monthly expenses.		\$	4,408.00
	, , ,			,
•	ur monthly net income.	00-	Φ.	
	ne 12 (your combined monthly income) from Schedule I.	23a.	·	4,277.00
23b. Copy y	our monthly expenses from line 22c above.	23b.	-\$	4,408.00
	ct your monthly expenses from your monthly income.	00-	¢	-131.00
The res	sult is your monthly net income.	23c.	\$	-131.00
For example, d	ct an increase or decrease in your expenses within the year after you o you expect to finish paying for your car loan within the year or do you expect your the terms of your mortgage?			or decrease because of a
☐ Yes.	Explain here:			

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Fill in this inforn	nation to identify your o	case:			
Debtor 1	Tyeisha D. Phillip	ns .			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN	DIVISION	
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Farm	- 400D				
Official Forn					
Declarat	ion About a	ın Individual	Debtor's Sc	hedules	12/15
obtaining money years, or both. 18		connection with a bankr			nt, concealing property, or r imprisonment for up to 20
0.9.					
Did you pay	or agree to pay some	one who is NOT an attorn	ey to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes. N	lame of person				uptcy Petition Preparer's Notice, nd Signature (Official Form 119)
	ty of perjury, I declare t true and correct.	hat I have read the sumn	nary and schedules filed	with this declaration ar	nd
X /s/ Tve	isha D. Phillips		X		
Tyeish	a D. Phillips e of Debtor 1		Signature of [Debtor 2	

Date ____

Date **July 1, 2016**

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		Documer	t Page 47 of 72)	
Fill in this infor	mation to identify your	case:			
Debtor 1	Tyeisha D. Phillip	os			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Marada Nasasa	Land Manage		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS, EASTERN DIV	/ISION	
Case number (if known)					☐ Check if this is an
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			r assets e of what you own
		vaiu	e or what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$_	104,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$_	2,622.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$_	107,122.00
Par	t 2: Summarize Your Liabilities		
			r liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_	190,409.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$_	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$_	36,941.00
	Your total liabilities	\$	227,350.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$_	4,277.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$_	4,408.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	her sche	dules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	ersonal,	family, or household

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Page 48 of 72 Case number (if known) Debtor 1 Phillips, Tyeisha D.

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,920.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill	in this inforn	nation to identify your	case:						
De	btor 1	Tyeisha D. Phill	•						
Do	btor 2	First Name	Middle Name	Last Name					
-	ouse if, filing)	First Name	Middle Name	Last Name					
Un	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS, EASTERN DIV	ISION				
	se number _					haalifahia ia aa			
(11 K	nown)				-	heck if this is an mended filing			
_		407							
	ficial Fo		Affaire for Individ	luals Eiling for P	ankruntov	414			
			Affairs for Individ			4/16			
info	rmation. If m	ore space is needed,			qually responsible for supply additional pages, write your r				
(if k	nown). Answe	er every question.							
Pa	rt 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before					
1.	What is you	r current marital statu	s?						
	☐ Married■ Not mar	ried							
2.	During the la	During the last 3 years, have you lived anywhere other than where you live now?							
	_								
		No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
	Debtor 1 Pr	ior Address:	Dates Debtor 1 there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
3.					y property state or territory?				
siai	es and territori	es include Anzona, Cal	ilomia, idano, Louisiana, Nev	ada, New Mexico, Puerto Ric	co, Texas, Washington and Wis	consin.)			
	■ No		- 1 1- 11 Verm On 1-1 (om /Off						
	☐ Yes. Ma	ike sure you fill out S <i>ch</i>	edule H: Your Codebtors (Offic	ciai Form 106H).					
Pa	rt 2 Explai	n the Sources of You	r Income						
4.	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a nave income that you receive to	Il businesses, including part-		ar years?			
	□ No								
		in the details.							
			5.11		2.11				
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income			
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)			
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$40,741.82	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

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Page 50 of 72 Case number (if known) Document Debtor 1 Phillips, Tyeisha D. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$82,549.00 ☐ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a business ☐ Operating a business For the calendar year before that: \$87,655.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No П Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Huntington Credit 7 Easton Oval Columbus, OH 43219-6010	April-June 2016	\$493.00	\$22,000.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this	payment	
8.	Within 1 year before you filed for bankruptcy insider? Include payments on debts guaranteed or cosign No Yes. List all payments to an insider	ned by an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this Include creditor's		
Pa	tt 4: Identify Legal Actions, Repossessions	s, and Foreclosures					
9.	Within 1 year before you filed for bankruptcy List all such matters, including personal injury ca and contract disputes. No Yes. Fill in the details.					ody modifications,	
	Case title Case number	Nature of the case	Court or agency		Status of the case		
	Wells Fargo v. Tyeisha Phillips 15-CH-8842	Foreclosure	Cook County C	ircuit	■ Pending □ On appeal □ Concluded		
10.	Within 1 year before you filed for bankruptcy. Check all that apply and fill in the details below. ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address		ty repossessed, for	eclosed, garnishe	ed, attached, seiz	Value of the	
		Explain what happened				property	
 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off ar accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 				set off any amour	nts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount	
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or and ■ No □ Yes		ty in the possessio			creditors, a	

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Case number (if known) Document Debtor 1 Phillips, Tyeisha D.

Par	t 5: List Certain Gifts and Contributions	S						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No ■ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 person) per	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		lid you give any gifts or contributions with a total	value of more than \$	600 to any charity?			
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value			
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankrup or gambling? ■ No □ Yes. Fill in the details.	otcy or	since you filed for bankruptcy, did you lose anyth	ning because of theft,	fire, other disaster,			
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending noe claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Par	t 7: List Certain Payments or Transfers							
16.	consulted about seeking bankruptcy or p	reparin	d you or anyone else acting on your behalf pay or g a bankruptcy petition? or credit counseling agencies for services required in		y to anyone you			
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	David Hernandez, P.C. 17566 Windsor Pkwy Tinley Park, IL 60487-7327		1700.00	None	\$0.00			
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that your Service No. No. Yes. Fill in the details.	itors or		transfer any propert	y to anyone who			
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include

Case 16-21459 Doc 1 Filed 07/01/16 Entered 07/01/16 07:42:30 Desc Main Page 53 of 72 Case number (if known) Document Debtor 1 Phillips, Tyeisha D. gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was payments received or debts Address property transferred made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a **beneficiary?** (These are often called asset-protection devices.) ☐ Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No П Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance before Address (Number, Street, City, State and ZIP account number instrument closed, sold, closing or transfer Code) moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No П Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State have it? Address (Number, Street, City, State and ZIP Code) and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Name of Storage Facility Do you still Who else has or had access Describe the contents Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value Address (Number, Street, City, State and ZIP Code) (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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own, operate, or utilize it, including disposal sites.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No		mat	eriai, ponutant, contaminant, or similar te	1116						
No Yes. Fill in the details. Name of site Address (Number, Street, Chy, State and ZIP Code) Name Address (Number, Street, Chy, State and ZIP Code) Nature of the case Status of the case Sta	Rep	ort a	ll notices, releases, and proceedings that	you know about, regardless of when t	hey	occurred.				
Yes. Fill in the details.	24.	Has	any governmental unit notified you that	you may be liable or potentially liable ι	und	er or in violation of an environmen	tal law?			
Name of site Address (Number, Street, City, State and 2IP Code) Anne Address (Number, Street, City, State and 2IP Code) Anne Address (Number, Street, City, State and 2IP Code) Anne Address (Number, Street, City, State and 2IP Code) Anne Address (Number, Street, City, State and 2IP Code) Anne Address (Number, Street, City, State and 2IP Code) An owner of a limited liability company (LLC) or limited liability partnership (LLP) An owner of a least 5% of the votting or equity securities of a corporation An owner of a least 5% of the votting or equity securities of a corporation And owner of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business (Number, Street, City, State and ZIP Code) Anne of accountant or bookkeeper Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Date Issued Address (Number, Street, City, State and ZIP Code) Date Issued Address (Number, Street, City, State and ZIP Code) Date Issued			No							
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material? No			Yes. Fill in the details.							
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business This is a years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued				Address (Number, Street, City, State and	Address (Number, Street, City, State and		Date of notice			
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Nature of the case Status of the case Nature of the case Status of the case Nature of the case N	25.	Hav	e you notified any governmental unit of a	ny release of hazardous material?						
Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Date Issued Address (Number, Street, City, State and ZIP Code) Date Issued Address (Number, Street, City, State and ZIP Code) Date Issued Address (Number, Street, City, State and ZIP Code) Date Issued Address (Number, Street, City, State and ZIP Code) Date Issued Address (Number, Street, City, State and ZIP Code)			No							
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Status of the case Status of the case Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Address (Number, Street, City, State and ZIP Code) Status of the case Status of the case			Yes. Fill in the details.							
No Yes, Fill in the details. Case Title Case Number Court or agency Name Nature of the case				Address (Number, Street, City, State and	d		Date of notice			
Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the cas	26.	Hav	e you been a party in any judicial or admi	inistrative proceeding under any enviro	onn	nental law? Include settlements and	d orders.			
Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the cas			No							
Address (Number, Street, City, State and ZIP Code) Part11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN. Dates business existed No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued Address (Number, Street, City, State and ZIP Code)			***							
Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper				Name Address (Number, Street, City, State	Na	ature of the case				
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name			Oliva Batalla Alivari Viva Bariana and	·						
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN. Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued	Pal	t III.	Give Details About Your Business or C	onnections to Any Business						
□ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Do not include Social Security number or ITIN. Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No ■ No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued	27.	With		•		•	usiness?			
□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN. Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued			_			•				
An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Name of accountant or bookkeeper Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued			☐ A member of a limited liability compa	ny (LLC) or limited liability partnership	p (Ll	LP)				
An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued Date Issued			☐ A partner in a partnership							
No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN. Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued			☐ An officer, director, or managing exe	cutive of a corporation						
Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued			☐ An owner of at least 5% of the voting	or equity securities of a corporation						
Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued			No. None of the above applies. Go to Pa	art 12.						
Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed No No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued Address (Number, Street, City, State and ZIP Code)			Yes. Check all that apply above and fill i	n the details below for each business.						
Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued				Describe the nature of the business			umbor or ITIN			
Institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)				Name of accountant or bookkeeper		•	umber of Trine.			
☐ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued	28.			y, did you give a financial statement to	o an	yone about your business? Include	e all financial			
Address (Number, Street, City, State and ZIP Code)		_ ` `								
(Number, Street, City, State and ZIP Code)		Na		Date Issued						
Part 12: Sign Below										
	Pai	t 12:	Sign Below							

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

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/s/ Tyeisha D. Phillips	Signature of Debtor 2
Tyeisha D. Phillips Signature of Debtor 1	Signature of Deptor 2
Date _July 1, 2016	Date
Did you attach additional pa	our Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to pay	e who is not an attorney to help you fill out bankruptcy forms?
■ No	
□ Vec Name of Person	n the Bankruntov Petition Preparer's Notice, Declaration, and Signature (Official Form 110)

Fill in this in	formation to identify your case:				irected in this form and	d in Form
Debtor 1	Tyeisha D. Phillips		122A-1S	upp:		
Debtor 2 (Spouse, if filing			□ 1. ·	There is no pres	umption of abuse	
	Northern District of Bankruptcy Court for the: Division	of Illinois, Eastern		applies will be n	o determine if a presu nade under <i>Chapter 7 l</i>	•
				Calculation (Offi	cial Form 122A-2).	
Case numb	er				does not apply now be out it could apply later.	cause of qualified
			□ Cł	neck if this is a	n amended filing	
Official	Form 122A - 1					
Chapte	er 7 Statement of Your Cui	rent Monthly	Incom	е		12/15
a separate sh number (if kn military servi	ete and accurate as possible. If two married people is teet to this form. Include the line number to which lown). If you believe that you are exempted from a pice, complete and file Statement of Exemption from Calculate Your Current Monthly Income is your marital and filing status? Check one or	he additional information a presumption of abuse beca Presumption of Abuse Un	applies. On the luse you do n	top of any addit	ional pages, write your consumer debts or bec	name and case ause of qualifying
		ny.				
	t married. Fill out Column A, lines 2-11.	ut hoth Columns A and D	lines 2 11			
	rried and your spouse is filing with you. Fill ou		•			
_	rried and your spouse is NOT filing with you.			A and D. lines 2	4.4	
	Living in the same household and are not lega	•		•		. do aloro un dor
	_iving separately or are legally separated. Fill penalty of perjury that you and your spouse are legapart for reasons that do not include evading the !!	gally separated under non	bankruptcy la	w that applies or		
	average monthly income that you received from all					
6 months,	For example, if you are filing on September 15, the 6-n add the income for all 6 months and divide the total by ame rental property, put the income from that property i	6. Fill in the result. Do not in	clude any inco	me amount more t	han once. For example, i	
			Colu Debt	mn A or 1	Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, deductions).	and commissions (befo	re all \$	6,920.00	\$	
	ny and maintenance payments. Do not include in B is filled in.	payments from a spouse	e if \$	0.00	\$	
of you from a roomm	nounts from any source which are regularly part or your dependents, including child support on unmarried partner, members of your household, nates. Include regular contributions from a spous trinclude payments you listed on line 3	. Include regular contribu	tions	0.00	\$	
	come from operating a business, profession,	or farm				
		Debtor 1				
Gross	receipts (before all deductions)	\$ 0.00				
	ary and necessary operating expenses	-\$ 0.00		0.00	•	
Net mo	onthly income from a business, profession, or far	m \$0.00 Copy	here -> \$	0.00	\$	
6. Net in	come from rental and other real property	Debtor 1				
Gross	receipts (before all deductions)	\$ <u>0.00</u>				
Ordina	ary and necessary operating expenses	-\$ 0.00				
Net mo	onthly income from rental or other real property	\$ <u>0.00</u> Copy	here -> \$	0.00	\$,
7. Interes	st, dividends, and royalties		\$	0.00	\$	_

Case 16-21459 Doc 1 Filed 07/01/16 Entered 07/01/16 07:42:30 Desc Main Document Page 57 of 72 Phillips, Tyeisha D. Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit 0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. 0.00 \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 6,920.00 6,920.00 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 6,920.00 **x** 12 Multiply by 12 (the number of months in a year) 83.040.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: IL Fill in the state in which you live. Fill in the number of people in your household. 63.896.00 Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clebs office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 17, here is no presumption of abuse. 14a. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Tyeisha D. Phillips

Tyeisha D. Phillips

Signature of Debtor 1

Date July 1, 2016

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Fill	in this information to identify your case:	Check the appropriate box as directed in
Deb	otor 1Tyeisha D. Phillips	lines 40 or 42:
	otor 2 ouse, if filing)	According to the calculations required by this Statement:
Unit	ted States Bankruptcy Court for the: Northern District of Illinois, Eastern Division	■ 1. There is no presumption of abuse.
	se number	☐ 2. There is a presumption of abuse.
(if k	(nown)	
○ ti	fisial Farms 400A 0	☐ Check if this is an amended filing
	ficial Form 122A - 2	
Ch	napter 7 Means Test Calculation	04/16
To fi	ill out this form, you will need your completed copy of Chapter 7 Statemen	t of Your Current Monthly Income (Official Form 122A-1).
is ne write	as complete and accurate as possible. If two married people are filing toget eeded, attach a separate sheet to this form, Include the line number to whice your name and case number (if known). The second	
ı aı	St. Determine Four Adjusted moonie	
1.	Copy your total current monthly incomeCopy line 11 fr	om Official Form 122A-1 here=> \$ 6,920.00
2.	Did you fill out Column B in Part 1 of Form 122A-1?	
	■ No. Fill in \$0 for the total on line 3.	
	☐ Yes. Is your spouse Filing with you?	
	☐ No. Go to line 3.	
	☐ Yes. Fill in \$0 the total on line 3.	
3.	Adjust your current monthly income by subtracting any part of your spo household expenses of you or your dependents. Follow these steps: On line 11, Column B of Form 122A-1, was any amount of the income you repoyou or your dependents?	
	No. Fill in 0 for the total on line 3.	
	Yes. Fill in the information below:	
	State each purpose for which the income was used	Fill in the amount you
	For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	are subtracting from your spouse's income
		\$
		\$
		\$
	Total	\$
		Copy total here=> \$0.00
4.	Adjust your current monthly income. Subtract line 3 from line 1.	\$ 6,920.00

Official Form 122A-2

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Debtor 1 Phillips, Tyeisha D. Case number (if known)

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2 Living 0 Housing

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,083.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$ 54
- 7b. Number of people who are under 65 X
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 108.00 Copy here=> \$ 108.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 130
- 7e. Number of people who are 65 or older X **0**
- 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00

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ebtor	1 <u>P</u>	Phillips, Tyeisha D.		- -	Case number (if kr	nown)			
Loc	cal Sta	andards You must use the IRS Local Standards to ans	wer the	questions in line	es 8-15.				
		n information from the IRS, the U.S. Trustee Program s into two parts:	has divi	ded the IRS Lo	cal Standard fo	r housing fo	or bankr	uptcy	
	Hous	ing and utilities - Insurance and operating expenses							
	Hous	ing and utilities - Mortgage or rent expenses							
То	answ	er the questions in lines 8-9, use the U.S. Trustee Pro	gram ch	art.					
		ne chart, go online using the link specified in the separate t may also be available at the bankruptcy clerk's office.	instructi	ons for this form	1.				
8.		using and utilities - Insurance and operating expenses dollar amount listed for your county for insurance and opera					ill in \$_		570.00
9.	Ηοι	ising and utilities - Mortgage or rent expenses:							
	9a.	Using the number of people you entered in line 5, fill in t listed for your county for mortgage or rent expenses				\$	05.00		
	9b.	Total average monthly payment for all mortgages and other	er debts	secured by your	home.				
		To calculate the total average monthly payment, add all contractually due to each secured creditor in the 60 month bankruptcy. Then divide by 60.							
		Name of the creditor	Averaç payme	ge monthly ent					
		Nationstar Mortgage LI	_ \$	2,373.02					
		Total average monthly payment	\$	2,373.02	Copy here=> -	s2,;	373.02	Repeat this amount on line 33a.	
	9c.	Net mortgage or rent expense.			_		1		
		Subtract line 9b (total average monthly paymen) from lin rent expense). If this amount is less than \$0, enter \$0	e 9a (mo	ortgage or	\$	0.00	Copy here=>	\$	0.00
10.		ou claim that the U.S. Trustee Program's division of th cts the calculation of your monthly expenses, fill in ar				ncorrect and	!	\$	0.00
	Ex	plain why:							
11.	Loc	al transportation expenses: Check the number of vehicle	es for wh	nich you claim an	ownership or o	perating expe	ense.		
). Go to line 14.							
		I. Go to line 12.							
		2 or more. Go to line 12.							
12.	Veh	icle operation expense: Using the IRS Local Standards enses, fill in the Operating Costs that apply for your Census	and the s region	number of vehic or metropolitan s	cles for which you	ou claim the	operating	g \$	0.00

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ebtor 1	Phil	lips, Tyeisha D.		Case number (if	known)		
13.		e ownership or lease expense: Using the IRS Local St claim the expense if you do not make any loan or lease icles.					
Ve	hicle 1	Describe Vehicle 1:					
13a.	Owners	ship or leasing costs using IRS Local Standard		\$	0.00		
13b.	_	e monthly payment for all debts secured by Vehicle 1. include costs for leased vehicles.					
	contrac	ulate the average monthly payment here and on line a tually due to each secured creditor in the 60 months aft ivide by 60.					
	Na	ame of each creditor for Vehicle 1	Average monthly payment				
			\$				
		Total Average Monthly Payment	\$	Copy here => -\$	0	Repeat this amount on line 33b.	
	Subtrac	nicle 1 ownership or lease expense of line 13b from line 13a. if this amount is less than \$0	, enter \$0	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	hicle 2	Describe Vehicle 2:					
13d.	. Owners	ship or leasing costs using IRS Local Standard		\$	0.00		
13e.		e monthly payment for all debts secured by Vehicle 2. Dehicles.	o not include costs for				
	Na	ame of each creditor for Vehicle 2	Average monthly payment				
			_ \$				
		Total Average Monthly Payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.		nicle 2 ownership or lease expense of line 13e from line 13d. if this amount is less than \$0	, enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.		transportation expense: If you claimed 0 vehicles in ortation expense allowance regardless of whether you u			s, fill in th <i>Eub</i>	blic \$	173.00
15.	deduct	onal public transportation expense: If you claimed 1 a public transportation expense, you may fill in what you nan the IRS Local Standard for Public Transportation.					0.00

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Debtor 1 Phillips, Tyeisha D. Case number (if known)

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.		
16.	self-employment taxes, Soc your pay for these taxes. Ho	mount that you will actually owe for federal, state and local taxes, such as income taxes, ial Security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 and he total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	\$	1,528.00	
17.	Involuntary deductions: Tunion dues, and uniform co	The total monthly payroll deductions that your job requires, such as retirement contributions, osts.		
	Do not include amounts that	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	371.00
18.	together, include payments	nonthly premiums that you pay for your own term life insurance. If two married people are filing that you make for your spouse's term life insurance. Do not include premiums for life insurance on-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: agency, such as spousal or	The total monthly amount that you pay as required by the order of a court or administrative child support payments.		
	Do not include payments o	n past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	nly amount that you pay for education that is either required:		
	for your physically or me	entally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total month	ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for	r any elementary or secondary school education.	\$	0.00
22.	required for the health and	penses, excluding insurance costs: The monthly amount that you pay for health care that is welfare of you or your dependents and that is not reimbursed by insurance or paid by a health nly the amount that is more than the total entered in line 7.		
	Payments for health insurar	nce or health savings accounts should be listed only in line 25.	\$	0.00
23.	you and your dependents, s	elephone services: The total monthly amount that you pay for telecommunication services for such as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it imployer.		
		or basic home telephone, internet and cell phone service. Do not include self-employment eported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expense allowances.	\$	3,833.00

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Debtor 1 Phillips, Tyeisha D. Case number (if known)

Add	Additional Expense Deductions These are additional deductions allowed by the Means Test.								
	Note: Do not include any expense allowances listed in lines 6-24.								
25.	Health insurance, disability insurance, and health saving insurance, disability insurance, and health savings accounts to dependents.								
	Health insurance \$	\$	744.00						
	Disability insurance \$	\$	0.00						
	Health savings account + \$	\$	0.00						
	Total \$	\$	744.00	Copy total here=>	\$	744.00			
	Do you actually spend this total amount?								
	□ No. How much do you actually spend?								
	Yes	\$							
26.	6. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C.§ 529A(b).					0.00			
27.	Protection against family violence. The reasonably necess you and your family under the Family Violence Prevention and								
	By law, the court must keep the nature of these expenses con	nfidentia	l.		\$	0.00			
28.	Additional home energy costs. Your home energy costs are	re includ	ed in your ins	surance and operating expenses on line 8.					
	If you believe that you have home energy costs that are more then fill in the excess amount of home energy costs.	than the	home energ	y costs included in expenses on line 8,					
	You must give your case trustee documentation of your actual claimed is reasonable and necessary.	al expens	es, and you	must show that the additional amount	\$	0.00			
29.	Education expenses for dependent children who are you \$160.42* per child) that you pay for your dependent children we elementary or secondary school.								
	You must give your case trustee documentation of your actual reasonable and necessary and not already accounted for in lin			must explain why the amount claimed is					
	* Subject to adjustment on 4/01/19, and every 3 years after the	nat for ca	ses begun o	n or after the date of adjustment.	\$	0.00			
30.	Additional food and clothing expense. The monthly amour than the combined food and clothing allowances in the IRS I the food and clothing allowances in the IRS National Standard	Nationa							
	To find a chart showing the maximum additional allowance, go this form. This chart may also be available at the bankruptcy of			specified in the separate instructions for					
	You must show that the additional amount claimed is reasonal	able and	necessary.		\$	0.00			
31.	Continuing charitable contributions. The amount that you instruments to a religious or charitable organization. 26 U.S.C				+\$	0.00			
32.	Add all of the additional expense deductions. Add lines 25 through 31.				\$	744.00			

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Debtor 1 Phillips, Tyeisha D. Case number (if known)

Dedu	actions for Debt Payment					
ar To	nd other secured debt, fill in lines 33a o calculate the total average monthly pays	ment, add all amounts that are contractually due				
th	ne 60 months after you file for bankruptcy Mortgages on your home:	. Then divide by 60.				verage monthly
33a.	Copy line 9b here			=>	pa \$	2,373.02
oou.	Loans on your first two vehicles:				Ψ.	2,373.02
33b.				=>	\$	800.46
33c.					\$	0.00
33d.	List other secured debts:			- -	Ψ.	0.00
	e of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes or insurance?		
				□ No		
	-NONE-			☐ Yes	\$	
=				– 199	Ψ.	
				□ No		
				☐ Yes	\$	
				□ No		
				☐ Yes	+\$	
					- φ	
33e.	Total average monthly payment. Add li	nes 33a through 33d	\$	2 172 49 t	Copy otal nere=>	\$3,173.48
ot	ther property necessary for your sup	secured by your primary residence, a vehic port or the support of your dependents?	le, or			
		st pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, dividual.				
Name	ne of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount
-NO	ONE-		\$	÷ 6	0 = \$	
		То	al \$	0 00 t	Copy otal nere=>	\$0.00
	o you owe any priority claims such a re past due as of the filing date of you	s a priority tax, child support, or alimony - the sankruptcy case? 11 U.S.C. § 507.	nat			
	No. Go to line 36.					
	Yes. Fill in the total amount of all of priority claims, such as those y	these priority claims. Do not include current or ou listed in line 19.	ongoing			
	Total amount of all past-due p	priority claims	\$	0.00 ÷	= 06	\$0.00

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Debtor 1 _	Phillips, Tyeisna D.		C	Jase n	umber (<i>if known</i>)		
For r	you eligible to file a case under Chapter 13? 11 U.S.C. § 10 more information, go online using the link fo <i>Bankruptcy Basics</i> uctions for this form. <i>Bankruptcy Basics</i> may also be available a	s specifi			ce.			
■ N	No. Go to line 37.							
□ Y	Yes. Fill in the following information.							
	Projected monthly plan payment if you were filing under C	hapter	13	\$				
	Current multiplier for your district as stated on the list issu Administrative Office of the United States Courts (for dis and North Carolina) or by the Executive Office for United all other districts).	stricts in	Alabama	X				
	To find a list of district multipliers that includes your distr link specified in the separate instructions for this form. T available at the bankruptcy clerk's office.			е		Cor	by total	
	Average monthly administrative expense if you were filing	under (Chapter 13		\$	here	e=> \$	
	d all of the deductions for debt payment. d lines 33e through 36.						\$	3,173.48
Total De	eductions from Income							
38. Add	all of the allowed deductions.							
	py line 24, All of the expenses allowed under IRS pense allowances	\$	3,833.	00				
Cop	py line 32, All of the additional expense deductions	\$	744.	00				
Cop	py line 37, All of the deductions for debt payment	+\$	3,173.	48	_			
	Total deductions	\$_	7,750.	48_	Copy total	here=	-> \$	7,750.48
Part 3:	Determine Whether There is a Presumption of Abuse							
39. Calc	culate monthly disposable income for 60 months							
39a	a. Copy line 4, adjusted current monthly income	\$	6,920.	00				
	o. Copy line 38, <i>Total deductions</i>	- \$	7,750.	48				
390	c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Subtract line 39b from line 39a	\$_	0.	00	Copy here=>\$		0.00	
For	the next 60 months (5 years)					x 60		
390	d. Total. Multiply line 39c by 60		\$		0.00	Copy here=>	\$	0.00
40. Find	l out whether there is a presumption of abuse. Check the bo	ox that	applies:			J	[
■ 1	The line 39d is less than \$7,700*. On the top of page 1 of this	form, c	heck box 1, The	ere is	no presump	tion of abus	e. Go to Part	5.
	The line 39d is more than \$12,850*. On the top of page 1 of the fyou claim special circumstances. Go to Part 5.	nis form	, check box 2, 7	There	is a presum	ption of abu	<i>ise.</i> You may	fill out Part 4
_	The line 39d is at least \$7,700*, but not more than \$12,850*.	Go to	line 41					
	piect to adjustment on 4/01/19, and every 3 years after that for ca			e dat	e of adjustme	ent.		
Cub	groot to agraptimont on 7/0 i/ not and overy o years and filation of		on on anton th	o ual		J. 16.		

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ebtor 1	Phili	ips, Tyeisna D.	Case	e number (# known)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled on Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	ut <i>A</i> 41a.	x .25		
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)	(I)	1 0	Copy nere=>	\$
		Multiply line 41a by 0.25				
of	your u	ne whether the income you have left over after subtracting all allowed decunsecured, nonpriority debt. e box that applies:	ducti	ons is enough to pay 25	%	
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>Their</i> Part 5.	re is r	no presumption of abuse.		
		39d is equal to or more than line 41b. On the top of page 1 of this form, chece. You may fill out Part 4 if you claim special circumstances. Then go to Part 5		x 2, There is a presumptio	n of	
Part 4:	Giv	re Details About Special Circumstances				
reas	onable	re any special circumstances that justify additional expenses or adjustmental alternative? 11 U.S.C. § 707(b)(2)(B).	ents	of current monthly incor	ne for	which there is no
— N	10. Go	o to Part 5.				
		in the following information. All figures should reflect your average monthly exp u may include expenses you listed in line 25.	ense	or income adjustment for	each it	em.
	ne	u must give a detailed explanation of the special circumstances that make the e cessary and reasonable. You must also give your case trustee documentation o justments.				
	G	ive a detailed explanation of the special circumstances		erage monthly expense ncome adjustment		
	_		\$		_	
	_		\$		_	
	_		\$		_	
	_		\$		_	
Part 5:	Sig	n Below				
	By sig	gning here, I declare under penalty of perjury that the information on this statement	ent ar	nd in any attachments is tr	ue and	correct.
	X /s/	Tyeisha D. Phillips				
	Ту	reisha D. Phillips anature of Debtor 1				
Da		ily 1, 2016				
	MN	/ DD / YYYY				

Certificate Number: 16199-ILN-CC-027686735



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>June 30, 2016</u>, at <u>8:24</u> o'clock <u>PM EDT</u>, <u>Tyeisha Phillips</u> received from <u>CC Advising</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Northern District of Illinois</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: June 30, 2016 By: /s/Dayton Chevalier

Name: Dayton Chevalier

Title: Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	-
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-21459 Doc 1 Filed 07/01/16 Entered 07/01/16 07:42:30 Desc Main Document Page 72 of 72

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

In re	Phillips, Tyeisha D.		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTO	ORNEY FOR I	DEBTOR	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy	y, or agreed to be par	d to me, for services ren	dered or to
	For legal services, I have agreed to accept		\$	1,700.00	
	Prior to the filing of this statement I have received	d	\$	0.00	
	Balance Due		\$	1,700.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comfirm.	npensation with any other person	n unless they are me	mbers and associates of r	ny law
	☐ I have agreed to share the above-disclosed compercopy of the agreement, together with a list of the n				w firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspec	cts of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credid. [Other provisions as needed] 	atement of affairs and plan whic	h may be required;	•	iptcy;
6.	By agreement with the debtor(s), the above-disclosed f	fee does not include the following	ng service:		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of a pankruptcy proceeding.		or payment to me for	representation of the de	btor(s) in
J	uly 1, 2016	/s/ David Hernan	dez		_
\overline{L}	Date	David Hernandez			_
		Signature of Attorno David Hernandez			
		17566 Windsor P	kwy		
		Tinley Park, IL 60)487-7327		
		(630) 862-6057 F david@rehablaw	Fax: (630) 729-319 .com	71	
		Name of law firm			_